

Medical Economics and Public Health

Gorgas Memorial Institute—Doctor Franklin Martin, chairman of the Gorgas Memorial Board, in a recent letter informs us that the criticism noted on page 1185 of the September issue of CALIFORNIA AND WESTERN MEDICINE regarding the appropriation of the term "Better Health" by the Gorgas Memorial had received the attention of the institute and would hereafter be discontinued.

This evidence of fair dealing is creditable to the Gorgas Memorial people, and pleasing to the physicians of California.

Doctor Martin says, in the closing paragraph of his letter, that "the object of the Memorial is to cultivate co-operation, not only between the medical profession and the laity, but to co-operate with all agencies working for health betterment. I hope the various organizations working toward that end in California will recognize this attitude on our part and pull with us."

"If more Physicians Took the Trouble to Make Thorough Examinations of Their Patients, never failing to examine the chest after the clothing had been completely removed from the upper part of the body and using auscultation, percussion and palpation, which are fundamental to physical diagnosis, there would be fewer failures and many more persons satisfied with the care of their physicians."

"If medicine is to be partitioned off into a series of specialties and cults practiced by men who have learned only one organ of the body or only one system of diagnosing and of treating disease, medicine as a science is bound to fail. No part of the human body can be detached and treated as separate from the organism as a whole."

"Physicians have watched the inroads made on the practice of medicine as a single science. They have noted the attempts of optometrists to parcel off the eye as their particular field; of cosmeticians to assume the right to treat disorders of the skin and to request legislatures to grant them power to remove moles, warts, tumors, and other excrescences; of chiropodists to assign to themselves the complete care of the feet; of chiropractors and osteopaths to make the field of manual manipulation their exclusive purview; and of some of the specialists within the ranks of medicine itself to assign all important functions to the teeth, to the lungs, or to other organs of the body. The time has come to call a halt on geographic warfare within the human body, and to look on it as a 'united states' that will be at least as firmly consolidated as the forty-eight individual constituents of our government."—Morris Fishbein (Journal A. M. A.).

The Loss of Doctor Harry E. Alderson's Services on the Board of Medical Examiners of California, after fourteen years of splendid service, is a loss to the cause of better health for all of our citizens. Anyone at all familiar with the trials and responsibilities of this board and with Doctor Alderson's uncompromising stand in the interests of public welfare will regret the conditions, whatever they may be, which influenced the governor to drop him from the board and substitute a doctor of much less experience in this particular type of work, whatever other accomplishments he may have.

Governor Richardson of California has "drafted" Doctor A. W. Morton to serve on his board charged with the duty of enforcing medical licensure and the enforcement of medical practice laws. *Doctor Morton is a member of the San Francisco County Medical Society.*

We Have Received From Some Unknown a marked copy of an interesting editorial apparently from *Medical Economics* which says, among other interesting things, that:

"Physicians will do well to hearken to the radio, as it broadcasts much medical information and some misinformation to the invisible millions.

"An irregular practitioner," continues the editor, "can 'go on the air, with a bald advertisement at so many dollars a minute, as was shown in a recent case in court. Healing cults, fantastic practors, faith curists, and all manner of persons who deny the basic truths of science, can have their voice. More than a hundred years have passed since Jenner, and yet there are faddists who are attacking vaccination and airing their views to the wide, wide ether. The publication of such matter as this, whether in the press or on the metered waves, is contrary to an enlightened public policy."

The chief trouble about radio or any other kind of advertising is that some people can't distinguish between promoting a cause and advertising an individual. The County Medical Society broadcasting would lend dignity and value to any health message not possible to obtain when broadcasted by any doctor, however well press agented.

According to the Public Press—The Berkeley Chiropractic College and its president, Percy Purviance, has brought suit to prevent the California Board of Chiropractor Examiners from conducting an examination of the "college."

"Such an investigation, Purviance alleges, would be a violation of the school's rights, if for no other reason than that *no member of the board of examiners was a licensed chiropractor for three years prior to his appointment to the board, as required by law.*"

An interesting point, and judged by previous history of the chiropractic law, one likely to win in the courts. Members of a former chiropractic board were ousted by the courts on the ground that they had not been "legally practicing chiropractic for three years" at the time of their appointment, as required by law. It begins to look as if the chiros had made their law so tight that they cannot get in themselves.

But they are "making hay," as shown by a report that they had recently licensed over 1500 of themselves. Once in, no matter how, there they are. Hurry up, boys, and get in before the illegality of your board is rediscovered.

Our Officials Tell Us that it cost the taxpayers of California from \$237.63 to \$290.32 per patient for care in our state hospitals last year. Assuming that the "shut-ins" had even decent care, these figures are really funny.

But look at this! Presumably, by the same sort of book-keeping, it cost from \$253.71 to \$280.77 per capita to maintain our prisoners. Does this help explain the popularity of prisons?

But look a little further. According to the official figures, it cost \$711.56 to keep a girl in the California Correctional School for girls; \$374.68 per head at the Correctional School of Industry, and \$643.03 per head at the Whittier Reform School.

At the Industrial Home for the Blind the cost was \$394.28, and \$492.02 per inhabitant at the Veterans' Home.

Interesting figures, aren't they?

Why is it cheaper to serve the mentally—and often physically also—ill citizens in "hospitals" than it is to serve criminals and the theoretically reformable in prisons and reformatories?

"Father, forgive them, they know not what they do."

Thank God for Ministers like Lloyd C. Douglas, who, in delivering the Baccalaureate Address at Michigan recently, said among many other important things that:

"When the honest scientist is haled into the witness-box by the irascible majority and is obliged to answer certain queries which it has conceived in stupidity and brought forth in impertinence, and candidly replies, 'We do not know,' the public shouts: 'Aha! Just as we thought! You do not know. Very well. We will go to somebody who does know,' and scurries away to the chiropractor (until very recently the driver of a jitney-bus); and the man with the Abrams machine (who has just retired from the tonsorial profession) and the owner of a neurocalomotor, who, by an examination of a lock of hair, a drop of blood and a certified check, can diagnose any ill to which mortal flesh is prone; and draw from a slot in the device a prescription that will guarantee a lasting cure by Thursday, at the latest. In every

department of life, small men willing to make capital of the public's psychoses; and unsuccessful men, who have tired of being honest at the prevailing price of that commodity, are arrogating to themselves large leadership. They speak with conviction. They never doubt, or wait, or hesitate, or ask the patient to come back next day for a decision. They put their dogmas down on the table with a bang and a growl. The public has been beaddled, mentally, just long enough to like that school of thought."

"No Smallpox was Reported in Rhode Island in 1923, nor during the last half of 1922. During the same period it was prevalent in the neighboring state of Connecticut. Rhode Island is free from this serious and disgusting malady because of the almost universal practice of vaccination in their public schools."

The Processes of Human Selection, according to Warren S. Thompson of Miami University, in a paper read before a meeting of the American Sociological Society and published in a recent issue of the Monthly Labor Review, are probably somewhat less rigorous than they were two thousand years ago because of modern medicine and charity, but if the lower classes, and particularly the defective, benefit most from modern charity, the upper classes benefit most from modern medicine, and probably the unfit thus kept alive do not materially change the relative proportions surviving in these different classes. It is the differential birth rate which changes these proportions, as anyone can readily see who studies mortality and morbidity tables.

Dr. Poo-Poo-Sin, as we will call him, is a Chinese herbalist who advertises extensively in certain newspapers. When the matter of advertising an unlicensed person to engage in illegitimate business was called to the attention of the newspapers by the Board of Medical Examiners, one of the excuses given by one of the papers (and it has also been given in Courts) was that "Dr. Poo-Poo-Sin" was patented or copyrighted by the United States Government, and therefore the illegal practitioner had a legal right to live up to his patented prerogatives. ? ! + —.

Mr. A. B. Bianchi, attorney for the Board of Medical Examiners, has now rendered a decision that ought to effectively settle this stupid claim. He ruled that Section 17 of the Medical Practice Act, as far as applicable for the purposes hereof, is in part as follows:

"Any person . . . who shall in any sign or in an advertisement use the word 'doctor,' the letters or prefix 'Dr.,' the letters 'M.D.,' or any other term or letters indicating or implying that he is a doctor, physician, surgeon or practitioner under the terms of this or any other act, or that he is entitled to practice hereunder or under any other law without having at the time of so doing a valid, unrevoked certificate as provided in this Act, shall be guilty of a misdemeanor and upon conviction thereof shall be punished as designated in this Act."

"The public at large has long associated the use of the word 'doctor,' and the symbols 'Dr.' and 'M.D.' with the practice of medicine. The purpose and object of the statute is to protect that public. In several of the states, the Medical Practice Acts have defined the use of those terms as constituting *ipso facto* the practice of medicine. To protect the public, therefore, it has been deemed advisable to restrain the use of this title and prefix and to compel all those entitled to prefix, or append such letters and titles, to be properly qualified and registered under the law.

"In California the use of the title 'doctor,' or the prefix 'Dr.' or the affix 'M.D.' by one unqualified under the Medical Practice Act has been made a crime. I know of no law which will act as a screen or defense, or which can be used as a screen or defense, for the violation of such a statute, passed for the public safety. If it were possible to hide behind the copyrighting of the word 'doctor,' the prefix 'Dr.' or the affix 'M.D.' in connection with any name, this statute could be violated by everyone in California, thus rendering it entirely nugatory.

"You will remember that in the case of Berry v. Alderson, the defendant sought to hide behind the incorporated name of 'K. C. Bloodless Surgeons,' and neither the Ap-

pellate nor the Supreme Court gave any attention to the contention that the defendant was entitled to use this fictitious name, and it was not held necessary in that case that the evidence show any fraud actually perpetrated on the public.

"I, therefore, advise that the use by anyone in any sign or advertisement of the word 'doctor,' the prefix 'Dr.' or the affix 'M.D.' is a violation of Section 17 of the Medical Practice Act, unless at the time of so doing he is entitled to practice under and by virtue of some provision of the Medical Practice Act or other statutes in *pari materia*, such as the Chiropractic or Osteopathic Acts of 1922."

"It Is a Serious Condition," concludes the Boston Medical and Surgical Journal, editorially (August 27, 1925), "when the state and nation takes upon itself the long-established prerogatives of the individual unless the individual fails to meet the requirements of society. We can understand the necessity of state or county hospitals in communities too poor or otherwise unable to provide them, but we believe that the creation of hospitals should be determined by definite indications rather than general principles."

Special Agent Henderson Reports to the Board of Medical Examiners that in the case of the People v. Fong Wan, Chinese herbalist of Oakland, said individual was "found not guilty by a jury in Department No. 2 of the Police Court of the City of Oakland." This, in spite of the fact that the People produced six witnesses who testified positively as to the pulse diagnosis and treatment given by the defendant on or about the date mentioned in the complaint."

Henderson reports that when Fong Wan was tried in the Oakland Police Court on January 29, 1925, he took the stand, testifying that he was a merchant, engaged in business at 576 Tenth street, selling rice, tea and herbs, etc., and denied that he had felt the pulse of the four witnesses who had testified to that effect.

In commenting upon this report, Doctor Pinkham, Secretary of the Board of Medical Examiners, considers it "added evidence of the difficulties they have in endeavoring to convict Chinese herbalists of violation of the Medical Practice Act."

Keep it up. You can at least make fakirs more careful in the language they employ, and now and then one may be proved so obviously guilty that some of our police courts will scold him.

Sutter Hospital—We welcome to our ethical advertising space in this issue the Sutter Hospital of Sacramento. This hospital is one of the splendid new modern health agencies of California, operated and directed by members of the California Medical Association, and is entitled to the consideration of physicians in its own territory and to the consideration of physicians who are referring patients from distant points.

The advertising pages of CALIFORNIA AND WESTERN MEDICINE are becoming more and more occupied with the announcements of creditable medical agencies of one sort or another, and no other kind can buy space in any of its issues. Physicians and other readers of this magazine may rely with confidence upon the reliability of service and information they will receive by application to this or any other hospital whose announcements are carried within our covers.

"The Physician Has Something to Sell," says William C. Woodward (Federation Bulletin), "when he offers his services to the community. The medical practice law ordains that what he offers for sale shall not be below a given standard, under penalty of fine and imprisonment. If I employ a physician and he does not give service of that quality, he offends not only against my private rights, but also against my rights as a member of the community. For any offense against my private rights, I am entitled to redress by civil suit, and the courts are open to me. For any offense against my rights as a member of the community, I am entitled to demand of the duly constituted law enforcement agencies of the

state that punishment be meted out against the criminal."

"The vendor of food offers the community food; the physician offers service. The vendor of food must offer food of a given quality; the physician must offer service of a given quality. Either may be penalized in case of default. Both are required to deal fairly and honestly with those who seek service or goods. Look at our medical practice law from that standpoint and you get a true understanding of its place among the laws of the community."

A Visiting Dietetic Service—We do not need more doctors as much as we need better articulated and more completely rounded contacts between the doctor and his patients. The pharmacist serves both the doctor and his patient in one important phase of health; the nurse, the physiotherapist, and the laboratory worker are equally effective in other phases of successfully co-ordinated health efforts.

Now come Miss Evaline Kerr and Miss Beth Dysart, pioneering in the exceedingly important field of dietetics. The growing importance of intelligent food service in health betterment is widely recognized. Such service is now justly looked upon as being as important as any of the other special services in all worthwhile hospitals and other health-serving institutions. But it is only now that we have the initial effort to extend this skilled technical help to patients in their homes. Visiting dietitians, working with and under the instructions of the doctor, are every bit as important a feature of successful medicine today as are nursing, pharmacy, physiotherapy, or any other of our health agencies and services. Nor is this all. It is no more possible or desirable for a doctor to know or remember all the technical points in the selection, preparation and serving of the most important of all his remedies—food—than it is incumbent upon him to know the technical problems of nursing. There are too many people practicing medicine under the guise of dietetics, and too few dietitians who are assisting doctors.

We feel that Miss Kerr and Miss Dysart are pioneering in a highly commendable venture, and we wish them success in the interests of better medicine and better health, more economically served for everyone. Their card will be found in our advertising pages.

Scientific Ethical Physiotherapy is still making progress in California. We welcome to our paid space, beginning with this issue, the physiotherapy laboratory of Lois M. Kendall, B.A., and George S. FitzJohn. Scientific technical physiotherapy is practiced in this laboratory by people thoroughly qualified and experienced, only under prescription of doctors of medicine. Their laboratory is located in the new Medico-Dental building.

Lippman and Sugarman Laboratory—We are glad to welcome to our advertising pages the Lippman and Sugarman Laboratory, as an ethical, essential agency in the progress of scientific medicine.

Doctor Lippman and Mr. Sugarman merit the approbation of physicians for their fine ethical stand in declining to carry their card in an official ethical medical journal until one of their members, Doctor Lippman, had secured his M. D. degree and license to practice medicine in California, even though they were not making diagnoses or otherwise practicing medicine. Thus, we see a splendid example of the influences of the moral code that governs physicians as it applies to right-thinking men even before they are fully qualified to assume responsibilities in the practice of medicine.

Examination for Public Health Nursing Certificate—The next examination for this highly prized certificate will be held at San Francisco and Los Angeles on Saturday, December 12, 1925.

Applications to take this examination must be filed with the State Board of Health not later than November 20. Blanks may be obtained from the offices of the board at Sacramento, San Francisco, or Los Angeles.

Under the legal requirements established by the Board of Health, eligible applicants for the examination shall be:

1. Registered nurse under the laws of California.
2. Shall have completed a public health nursing course

of from four to eight months in a school approved by the California State Board of Health, or

3. Shall have completed at least a semester (four months) of post-graduate work in social service, including theory and practical work, or

4. Shall present evidence of having engaged in general public health nursing for at least two years in connection with a public health organization approved by the California State Board of Health. (See paragraph 7.)

5. All applications for examination as public health nurse shall be filed in the office of the California State Board of Health, State building, San Francisco, and shall be passed on by a committee of the board.

6. Upon examination, credit of 5 per cent will be given to applicants who have completed a four months' course in public health nursing, and 10 per cent to applicants who have completed an eight-months' course in public health nursing.

7. On and after June, 1926, presentation of evidence of having attended a summer course of at least six weeks at the University of California at Berkeley or Los Angeles, or a course of equal standard at any other university, shall be required in addition to two years' practical experience.

8. All applications shall have attached to them an affidavit sworn to before a notary public, as to qualifications outlined in paragraphs 2, 3, 4, and 7.

William McFee, writing in *The Nation's Business*, says: "I can produce a business man who knows exactly what he is talking about, who will show that, of every dollar given to a certain organization, the ultimate beneficiary receives something less than 15 cents, the other 85 going in 'overhead,' stationery, salary of staff, purchase of mailing lists, and an elaborate propaganda that swamps the ordinary citizen until he becomes callous and drops the whole mess in the waste-paper basket."

In commenting upon the statement editorially, *The Dearborn Independent* believes that:

"There needs to come a wholesale exposure of all sorts of professionalism in every kind of so-called 'welfare' work—industrial, educational, and religious."

The Card of E. S. Pomeroy, M. D., Urologist, Salt Lake City, Utah, will be found in this and subsequent issues of *CALIFORNIA AND WESTERN MEDICINE*. Doctor Pomeroy is the first member outside of California to place his name in a dignified manner before his colleagues who receive *CALIFORNIA AND WESTERN MEDICINE* monthly.

More members of other state medical associations seem to appreciate the value of these cards in their official publications, as judged by the space they occupy, than do many of the members of California, Utah, and Nevada. Some of the other official medical journals contain as many as twelve or fourteen pages of these cards.

"There Never was a Time Until Now," concludes the *Journal Indiana Medical Association*, "when the medical profession, as a profession, stood in greater danger of losing its economic and social standing, and the time is ripe for active and drastic action that will tend toward self-preservation. . . . We may be accused of being alarmists, but we venture to say that within the next five or ten years medical men, individually and collectively, will be fighting for their very existence unless they adopt some means for self-preservation."

"Dr. Leonard L. Landis of New York, who styles himself the 'chairman of the American Association of Independent Physicians,' is trying to point the way to success in the practice of medicine through the medium of a book he is trying to sell. We hope," says the *Journal Indiana Medical Association*, "that no members of our association will bite at the bait thrown out. According to the *Journal of the American Medical Association* of June 13, 1925, Landis is the individual who did conduct a medical institute in New York City under the title of 'House of Health,' and New York papers at different times have recorded the arrest of Landis, both by federal and local authorities, in connection with unsavory medical activities. A renegade physician like Landis deserves

no recognition of any kind whatsoever from reputable medical men."

These quotations should prove sufficiently enlightening to the several Western physicians who have written CALIFORNIA AND WESTERN MEDICINE inquiring about Landis.

We Get an Interesting Insight into human nature as it is and always has been, in the remarkable "news value" attached to a charitable contribution "*to be used without red tape.*"

A Mr. Connors recently gave a million dollars to be used for any worthy purpose *wherever* and *whenever* it was needed and *without* red tape. Old-fashioned charity, as the Master defined and sanctified it, is not so common nowadays. Red tape—government or organization—is the prominent feature. Led by visionaries, we are trying to convert charity into "Big Business. We are debasing the sanctified purposes and methods of charity, and we are certain to fail. Already the handwriting on the wall is clear in some centers, and it is safe to prophesy that the Big Business, wholesale, impersonal method of giving will pass as people become disillusioned.

Material assistance is the least helpful phase of true charity, and when handled as Big Business is handling it "charity" tends to debase character and encourage thriftlessness.

Every Doctor Interested in Medical Economics should read (Illinois Medical Journal, September) the address given by President J. H. Mitchell before the annual meeting of the Chicago Dermatological Society. And don't overlook the discussion.

"Health Institutes of Dubious Reputation are having tough-going since the A. M. A. took a crack at them at the Atlantic City session. The public might as well know that practicing medicine by proxy through intermediaries, by mail, or under the auspices of lay organizations, is not very trustworthy and usually is dangerous. —Journal Indiana Medical Association.

"Water, Water Everywhere"—There appears in this issue of CALIFORNIA AND WESTERN MEDICINE a new advertisement of drinking waters. This advertisement will continue to run for a number of months—we hope indefinitely—and the advertisers have chosen to utilize extracts from the highest scientific authorities, including the A. M. A., as the basis for their claims of the advantages of drinking "pure water."

No individual physician, no organization, no public body has greater responsibilities nor greater opportunities for error than is inherent in the promotion of drinking water, one of the fundamental essentials of human life. CALIFORNIA AND WESTERN MEDICINE could have the majority of its available advertising pages filled with highly paid propaganda for this and that water, alleged to accomplish this and that medical and health purpose. Ninety-five per cent of the claims of these waters, as is well known to physicians everywhere, are based upon ignorance or cupidity. Certain "mineral waters" contain well-known chemicals that have certain uses in the treatment of certain conditions. There is no more reason why these remedies should be prescribed indiscriminately for everybody than there is why the salts and other substances they contain should be universally prescribed from drugstore bottles because they happen to be indicated, in the opinion of competent physicians, for the ailments of certain individual patients.

In a word, wholesale prescribing of mineral waters—if in fact they *are* mineral waters—through advertisements in the secular press, merits exactly the same condemnation that is handed out to the patent medicine interests who propagandize very often the very same salts put up in bottles and sold over the drug counter.

CALIFORNIA AND WESTERN MEDICINE refuses to accept advertisements from "mineral water" companies making inordinate therapeutic claims in their copy to be published with us or in any other copy distributed by them in any manner whatsoever. Under that rigid rule we have, out of the hosts of applications, accepted within the last four

years only the advertisements of Puritas Water Service, Calso Water Company, Shasta Water Company, and Bartlett Springs Company.

This matter is being treated editorially at this time purposely with the hope that we may secure comments and reactions favorable or unfavorable to our policy from physicians or other persons who are as keenly interested as we are in the promotion of all that is good and in the condemnation of all that is bad, whether it be water or other substances—this purely in the interests of the personal and public health welfare of our citizens.

Treatment of Pertussis by Roentgen Ray—This paper, by Lawrence W. Smith, Henry I. Bowditch, Ralph D. Leonard, Paul W. Emerson, Edwin T. Wyman, Elmer W. Barron, Hyman Green, Elliott Hubbard and Max Tennis, Boston (Journal A. M. A.), represents an attempt to summarize the outstanding clinical and laboratory findings in 850 cases of pertussis treated by the roentgen ray. Of the 850 cases, 750, or 88.2 per cent, occurred under 7 years of age, and 260, or 30.5 per cent, of this group, were in infants under 2 years of age. Seventy-two cases occurred in infants under 6 months of age, with ten definite cases in infants under 2 months of age. This fact seems of considerable significance from the point of view of developing preventive measures, as the greatest mortality is well recognized to be in the younger age group. It is also interesting to note that while whooping cough ordinarily confers a permanent immunity like scarlet fever, typhoid and other infectious diseases, a second infection may occur, and three such cases were found among adults in this series, in which there was a very definite previous history of whooping cough in childhood, with the second infection usually contracted from a child in the family. The most important bit of knowledge derived from this study is that the infectious period of whooping cough is in the catarrhal stage and that it diminishes very rapidly after the actual paroxysmal period begins. The treatment of these cases has fallen into two main groups. First, the series treated by roentgen ray alone, and second, a group given combined vaccine and roentgen-ray therapy. There is a small series of controls which have not received treatment. The effects of the roentgen-ray treatment have confirmed in general the earlier results. Roughly, 80 per cent. of the cases have shown a definite diminution in the number and severity of the paroxysms in a time interval ranging from a few hours to a week or ten days. In some of these cases the clinical benefit has been extraordinary. This is particularly true of the group of infants with convulsions, as noted previously. In general, it is safe to conclude that the younger patients in the early paroxysmal stage show the most striking benefit. The next group in which the results are most striking is that in which the paroxysms have persisted for a considerable period of time. In this respect the treatment is not specific. It is interesting, however, that in this series of cases the best results were obtained in the post-pertussis type of persistent bronchial irritation. This benefit is shared about equally by the various age groups, although it is perhaps true that the younger patients do a little better. It does not seem necessary at this time to go further into statistical detail. In the second group, who have received both roentgen ray and vaccine, the percentage of patients benefiting seems to be practically the same, but the degree of benefit seems to be more marked, and the duration of the paroxysmal stage seems to be reduced more by this combined method of treatment than by roentgen ray alone. In both groups the treatment results, by the end of the second week almost invariably, and in many instances by the end of the first week, in a definite reduction of the size of the hilum lymph nodes and of the peribronchial thickening. This seems to parallel quite closely the clinical course of the disease, and it has been interesting to see how closely the roentgenologic interpretation of the chest films coincides with the history and physical findings of these cases. Certainly more than 80 per cent. of the roentgen-ray readings check almost exactly the clinical condition of the cases. These observations suggest that, by early diagnosis, adequate quarantine for the actual infective period can be required, with a concomitant decrease in morbidity and mortality.